County

Ownership:
Highest Level License:
Operate in Conjunction with CBRF?
Title 18 (Medicare) Certified? Skilled No No Average Daily Census: 101

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)	%				
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	% 	Age Groups	 %	Less Than 1 Year 1 - 4 Years	24. 5 37. 3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	12. 7	More Than 4 Years	38. 2
Day Servi ces	No	Mental Illness (Org./Psy)	60. 8	65 - 74	25. 5		
Respite Care	No	Mental Illness (Other)	36. 3	75 - 84	40. 2		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	20. 6	****************	*******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	0.0	95 & Over	1.0	Full-Time Equivaler	
Congregate Meals	Yes	Cancer	0.0			Nursing Staff per 100 Re	esi dents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/00)	
Other Meals	Yes	Cardi ovascul ar	0.0	65 & Over	87. 3	[
Transportation	No	Cerebrovascul ar	1.0			RNs	9. 2
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	3. 9
Other Services	No	Respi ratory	0. 0			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	2. 0	Male	41. 2	Aides & Orderlies	62. 9
Mentally Ill	No			Female	58. 8		
Provi de Day Programming for			100. 0				
Developmentally Disabled	No				100. 0		

Method of Reimbursement

	Medicare (Title 18)		(Medicaid (Title 19)		0ther			Private Pay			Manageo			Percent		
			Per Die	m		Per Die	m		Per Dien	n		Per Dien	1	I	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	Õ	0. 0	\$0.00	88	94. 6	\$103.01	Ŏ	0. 0	\$0.00	9		\$153.00	Ŏ	0. 0	\$0.00	97	95. 1%
Intermedi ate				5	5.4	\$85. 29	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	5	4. 9%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain Inj		0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depender	nt 0	0.0	\$0. 00	0	0.0	\$0. 00	0	0.0	\$0. 00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	0	0.0		93 1	00.0		0	0.0		9	100.0		0	0.0		102	100.0%

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution	of Residents'	Condi ti o	ns, Services,	and Activities as of	12/31/00
				%	Needi ng		Total
Percent Admissions from:		Activities of	%		stance of	% Totally	Number of
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	0ne 0	r Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	6. 9		48. 0	45. 1	102
Other Nursing Homes	46. 7	Dressi ng	15. 7		48. 0	36. 3	102
Acute Care Hospitals	46. 7	Transferring	50. 0		31. 4	18. 6	102
Psych. HospMR/DD Facilities	0.0	Toilet Use	31. 4		32. 4	36. 3	102
Rehabilitation Hospitals	0. 0	Eating	48. 0		30. 4	21. 6	102
Other Locations	6. 7	************************************	******	*****	******	********	******
Total Number of Admissions	30	Continence			Special Treat		%
Percent Discharges To:		Indwelling Or Externa		1.0		Respiratory Care	2. 9
Private Home/No Home Health	3. 4	Occ/Freq. Incontinent		72. 5		Tracheostomy Care	0. 0
Private Home/With Home Health	6. 9	Occ/Freq. Incontinent	of Bowel	42. 2	Recei vi ng		0. 0
Other Nursing Homes	10. 3					Ostomy Care	3. 9
Acute Care Hospitals	6. 9	Mobility	_			Tube Feeding	1. 0
Psych. HospMR/DD Facilities	0.0	Physically Restrained	1	5. 9	Recei vi ng 1	Mechanicallÿ Altered D	iets 34.3
Rehabilitation Hospitals	0.0				0.1 5 4.1		
Other Locations	0.0	Skin Care				nt Characteristics	~ ~
Deaths	72.4	With Pressure Sores		3. 9		ce Directives	25. 5
Total Number of Discharges		With Rashes		3. 9	Medications		
(Including Deaths)	29				Kecei vi ng l	Psychoactive Drugs	86. 3
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		Ownershi p:		Bed Size:		Li censure:			
	Thi s	Government		100- 199		Skilled		Al l	
	Facility	y Peer Group		Peer	Group	Peer Group		Faci l	ities
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	96. 2	82. 7	1. 16	83. 6	1. 15	84. 1	1. 14	84. 5	1. 14
Current Residents from In-County	95. 1	85. 7	1. 11	86. 1	1. 10	83. 5	1. 14	77. 5	1. 23
Admissions from In-County, Still Residing	80. 0	34. 4	2. 32	22. 5	3. 56	22. 9	3. 50	21. 5	3.72
Admissions/Average Daily Census	29. 7	67. 7	0. 44	144. 6	0. 21	134. 3	0. 22	124. 3	0. 24
Discharges/Average Daily Census	28. 7	72. 5	0.40	146. 1	0. 20	135. 6	0. 21	126. 1	0. 23
Discharges To Private Residence/Average Daily Census	3. 0	23. 7	0. 13	56 . 1	0. 05	53. 6	0.06	49. 9	0.06
Residents Receiving Skilled Care	95. 1	83. 9	1. 13	91. 5	1.04	90. 1	1.06	83. 3	1. 14
Residents Aged 65 and Older	87. 3	83. 5	1. 05	92. 9	0. 94	92. 7	0. 94	87. 7	0. 99
Title 19 (Médicaid) Funded Residents	91. 2	77. 2	1. 18	63. 9	1.43	63. 5	1. 43	69. 0	1. 32
Private Pay Funded Residents	8. 8	17. 9	0. 49	24. 5	0. 36	27. 0	0. 33	22. 6	0. 39
Developmentally Disabled Residents	0. 0	3. 4	0.00	0. 8	0.00	1. 3	0.00	7. 6	0.00
Mentally Ill Résidents	97. 1	56. 6	1.72	36. 0	2. 70	37. 3	2. 60	33. 3	2.91
General Medical Service Residents	2. 0	14. 3	0. 14	21. 1	0.09	19. 2	0. 10	18. 4	0. 11
Impaired ADL (Mean)	51.0	50.8	1.00	50. 5	1. 01	49. 7	1.03	49. 4	1.03
Psychological Problems	86. 3	61. 2	1.41	49. 4	1. 75	50. 7	1. 70	50. 1	1.72
Nursing Care Required (Mean)	6. 3	6. 6	0. 95	6. 2	1.01	6. 4	0. 97	7. 2	0.87